

Tourist Home Licenses – Guidelines and Application

A liquor license may be issued for a building, whether or not it is a private residence, which is provided with the number of bedrooms available for the accommodation of travelers, and the equipment and facilities prescribed in the Liquor Licensing Regulations and where, in consideration of payment, food and lodging is provided to guests.

If you are interested in obtaining a Tourist Home liquor license in Newfoundland and Labrador please use the following as a **guideline** of the requirements. *Please note: other agencies or departments may require information further to that which is listed below.*

Guidelines / Requirements	✓
Newfoundland Labrador Liquor Corporation (NLC) License Requirements	
Completed application for a Liquor Establishment license (see attached)	
 Completed Personal Data Sheets (enclosed) for each shareholder, director and/or officer who is in charge of the premises 	
 Current Certificate of Conduct for each shareholder, director and/or officer who is in charge of the premises 	
Written Municipal approval	Ì
Written approval from the Provincial Fire Commissioner's Office	
• Verification of Tourism license (see Tourism, Culture, Arts and Recreation section below)	
 One set of floor plans, drawn to scale on paper no larger than 8.5" x 14", outlining the proposed licensed area and including dimensions of clearly identified rooms (including storage and the total number of fixtures in the men's and ladies' washrooms) 	
 A current signed copy of a lease or purchase agreement, or another document that verifies ownership and/or legal possession of the establishment (e.g., Property Tax Bill) 	
Verification of posting of three public notices (see attached)	[
Copies of three newspaper advertisements (see attached)	
• If incorporated, please provide Notice of Directors form, <i>The Corporations Act</i> (Form 6)	
Verification of Food Establishment License (see Digital Government and Service NL section below)	0
• Written approval from Buildings Accessibility and Fire & Life Safety (see Digital Government and Service NL section below)	
Once all information is collected, a pre-licensing inspection will be conducted	
Other Agency Requirements	
Digital Government and Service NL	
The proposed establishment will need a Food Establishment License. Digital	

The proposed establishment will need a Food Establishment License. Digital Government and Service NL conducts health inspections at all food establishments in the province. For more information, please visit https://www.gov.nl.ca/dgsnl/inspections/ or call (709) 729-2104.

Approvals for Buildings Accessibility and Fire and Life Safety are also required. For more information, please visit https://www.gov.nl.ca/dgsnl/licenses/building/ or call (709) 729-1038.



Tourism, Culture, Arts and Recreation

The proposed establishment requires a Tourism License. For more information, please visit <u>https://www.gov.nl.ca/tcar/tourism-division/licensing/</u> or call (709) 729-2835.



ADVERTISING REQUIREMENT

In keeping with Section 34 of the *Liquor Control Act*, an advertising requirement must be fulfilled when an application is being made for a liquor establishment license:

<u>Newspaper advertisements</u> measuring at least 2" x 3" must appear in a local newspaper once a week for three consecutive weeks. Copies of the newspaper advertisements, along with the name of the newspaper and insertion dates, must be submitted with the application.

All newspaper advertisements must use the following wording:

	Public Notice	
<insert company="" name="" of=""></insert>		
OPERATING AS	<insert establishment="" name="" of=""></insert>	
AT	<insert address,="" city="" exact="" location="" or="" street="" town=""></insert>	
IN THE PROVINCIAL DISTRICT OF	<insert district="" name="" of="" provincial=""></insert>	
IS APPLYING FOR A	Choose an item. to sell spirits, beers, and wines on premise.	
Resident and community feedback is an important part of the application process. If you have any concerns, or object to this application, please forward an email to <u>licenseconcerns@nlliquor.com</u>		

by 4:30 p.m. on

<insert date 3 weeks from date of initial publication>

Public notices measuring 8.5" x 11" must be posted in three conspicuous places within the specified Municipality or Electoral District (e.g., public bulletin boards, retail outlets, restaurants), in proximity to the proposed site, for three consecutive weeks. After the expiration of the three weeks, officials of the premises on which the notices were posted must sign the back of the notices as verification of posting.

Please use the Public Notice template attached for the applicable locations.

Please note that advertisements are valid for six months from the date of the last publication. If the six month period lapses, the applicant is required to re-advertise.



LIQUOR LICENSE APPLICATION

PUBLIC NOTICE

OPERATING AS		•	•	•	•	•	•	•	•	•
ΑΤ	•	•	•	•	•	•	•	•	•	•
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IN THE PROVINCI	AL	U	19	ΙΓ	ΠŪ		U		•	•

to sell spirits, beers, and wines on premise

Resident and community feedback is an important part of the application process.

If you have any concerns, or object to this application, please send an email to: **licenseconcerns@nlliquor.com** by 4:30 p.m. on:

- * A copy of the feedback may be provided to the license applicant.
- ** Please contact your municipality if you have questions or concerns about zoning bylaws and requirements.



APPLICATION FOR LIQUOR ESTABLISHMENT LICENSE APPLICATION FOR TRANSFER OF EXISTING LICENSE

□ Airport Establishment
 □ Club
 □ Hotel / Motel
 □ Institution
 □ Lounge
 □ Military Mess
 □ Recreational Facility
 □ Restaurant
 □ Restaurant/Lounge
 □ Tour Boat
 □ Tourist Home
 □ Transportation Service

*Please note:

An application fee of \$200 must accompany this completed form.

All licenses are subject to an Annual Licensing Fee. For more details, please see the License Fee Schedule.

If applying for transfer of license, name under which License was last issued:

Address: Phone: Phone: Phone: Phone: Phone: Phone: No 2. Applicant Information: Name: Sumame Given Names Address: Mobile: Fax: Phone: Mobile: Fax: Email: 3. Establishment Information: (a) Business name of establishment: (b) Physical Address of Establishment (please complete ALL FIELDS) Address: Postal Code: (c) Mailing Address of Establishment (if different from above) Address: City/Town: Postal Code: City/Town: Postal Code: City/Town: Postal Code: City/Town: Postal Code: Postal Code:				License No:	
PART ONE TO BE COMPLETED BY ALL APPLICANTS 1. Do you require a catering license? Yes No 2. Applicant Information: Name:	Add	ress:			
TO BE COMPLETED BY ALL APPLICANTS 1. Do you require a catering license? Yes Name: Sumame Given Names Address: Phone: Email: 3. Establishment Information: (a) Business name of establishment: (b) Physical Address of Establishment (please complete ALL FIELDS) Address: City/Town: Postal Code: (c) Mailing Address of Establishment (if different from above) Address: City/Town:				Phone:	
1. Do you require a catering license? Yes No 2. Applicant Information: Name:		-			
2. Applicant Information: Name:	TOI	BE COMPLETED BY ALL APP	LICANTS		
Name:	1.	Do you require a catering lice	ense? 🗆 Yes 🛛 No		
Sumame Given Names Address:	2.	Applicant Information:			
Phone:		Name:		Given Names	
Email:		Address:			
3. Establishment Information: (a) Business name of establishment: (b) Physical Address of Establishment (please complete ALL FIELDS) Address: City/Town: Postal Code: (c) Mailing Address of Establishment (if different from above) Address: City/Town:		Phone:	Mobile:	Fax:	
(a) Business name of establishment:		Email:			
(b) Physical Address of Establishment (please complete ALL FIELDS) Address:	3.	Establishment Information:			
Address:		(a) Business name of estab	lishment:		
City/Town:		(b) Physical Address of Es	tablishment (please complete ALL FI	ELDS)	
Postal Code:		Address:			
(c) Mailing Address of Establishment (if different from above) Address:		City/Town:			
Address:		Postal Code:			
City/Town:		(c) Mailing Address of Esta	ablishment (if different from above)		
		Address:			
Postal Code:		City/Town:			
		Postal Code:			



5.

6.

7.

(a) If not sole owner, give particulars of agreements with any other party or parties

) If a corporation, give: ameate of Incorporation ublic or Private Company ovincial or Federal Charter ficers and Directors (If more than four, please provid ame ate whether applicant will occupy building as owner or		
ameate of Incorporation ublic or Private Company ovincial or Federal Charter ficers and Directors (If more than four, please provid ame	de separate list)	
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ficers and Directors (If more than four, please provio ame	de separate list)	
ame		ding Postal Code)
ate whether applicant will occupy building as owner or		
	tenant	
as the applicant ever applied for a license for the sale on member of a partnership, or an officer, director or shar	of spirits, beers or wine eholder of a Corporatio	s in Canada or elsewhere either as an individua n?
the establishment to be managed by the applicant?	I Yes 🗖 No	
ame in Full	Address	Age
ill the establishment be operated throughout the year o	or only seasonally?	



PART TWO

TO BE COMPLETED BY APPLICANTS APPLYING FOR AN INSTITUTION LICENSE OR MILITARY LICENSE

1. Name of institution, Club, Branch, Lodge, Division or mess _____

2. Incorporated or chartered ______ Date_____ Date_____

3. Please provide separate list of executive including names, titles, addresses and telephone numbers.

4. State date on which institution or club commenced active operation ____

PART THREE

TO BE COMPLETED BY APPLICANTS APPLYING FOR A TRANSPORTATION SERVICE LICENSE

- 1. Name and address of Company or Organization:
- 2. Indicate type of transport for which this application is being made:

PART FOUR

DATE

TO BE COMPLETED BY ALL APPLICANTS

l, _____

do solemnly declare that:

- I have knowledge of the matters herein deposed to;
- all information set forth in the attached application to the Newfoundland Labrador Liquor Corporation is true and correct in substance and in fact; and

_____,of _____

• I made this solemn declaration conscientiously believing it to be true, and knowing that it is of the same force and effect as if made under oath.

SIGNATURE OF APPLICANT

Please send completed application to:

NEWFOUNDLAND LABRADOR LIQUOR CORPORATION

P.O. Box 8750, Stn. A

St. John's, NL A1B 3V1

Attention: Regulatory Services

Telephone: (709) 724-1159	Fax: (709) 753-8625	Email: corporateservices@nlliquor.com
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PERSONAL DATA SHEET

ame of Establishment for which this report is submitted	
ocation	

Given Name(s)
Email
Place of Birth

		our family engaged, in any capacity, with the enforcement or administration of the <i>Liquor</i> or <i>Corporation Act</i> ?
YES	D NO	If yes, please give details

Have there bee	en any findings o	f guilt against you of an offense in Canada or the United States?
YES	□ NO	If yes, please attach a certified copy of your criminal record.

The Royal Canadian Mounted Police, the Royal Newfoundland Constabulary or any other law enforcement agency is hereby authorized to supply the Newfoundland Labrador Liquor Corporation with any information which the Board considers pertinent to my application for a license.

Date

Signature of Applicant